BEST AVAILADIE COPY													
OFQ1 1-								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 0980/6/4													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TO	TAL CLAIMS	.30				Γ	RATE	FEE	1	RATE	FEE		
FC	DR 03/0	NUMBER FILED.		NUMBER EXTRA		8	ASIC FEE	355.00	OR	BASIC FEE	710.00		
TC	TAL CHARGE	20 - minus 20=		. 10			X\$ 9=		OR	X\$18=	180.0		
INI	EPENDENT C	9 - minus 3 =		6			X40=		OR	X80=			
MULTIPLE DEPENDENT CLAIM P			RESENT				H			O.	-	4800	
* If the difference in column 1 is less than zero, enter "0" in column 2								+135=		OR	+270=		
TOTAL ON TOTAL 1/37												1.370.	
h	123/04	(Column 1)	MENDEL	(Cotu	mn 2)	(Column 3)		MALL I	NTITY	OR	OTHER SMALL		
ENTA		CLAIMS REMAINING AFTER AMENDMENT		PREV	RESI BER OUSLY FOR	PRESENT EXTRA	L	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
2	Total	. 14	Minus	. 3	0	• 0	1	X\$ 9=		OR	X\$18=		
AMENDMENT	Independent	. 9	Minus	***	9.	G-•	F	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-135=	·	OR	+270=		
		107AL									TOTAL ADDIT. FÉE	2	
	•		DIT. FEE		OR	ADDIT. FEE	<u> </u>						
		(Column 1) CLAIMS REMAINING AFTER AMENDMENT			IEST IBER OUSLY	PRESENT EXTRA	Г	RATE	ADDI- TIONAL FEE	1.5	RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus' :	01				X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		•	-	X40=			X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	A00-		
								135=		OR	+270=		
YOTAL ADDIT. FEE										OR	ADDIT, FEE		
Ŀ		(Column 1)			mn 2)	(Column 3)-	_	:					
ENTC		CLAIMS REMAINING AFTER AMENDMENT		PREV		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT C	Total		Minus 🛶	•••		9	1	(\$ 9=		OR	X\$18=	j. j.	
	Independent		Minus	,,,,,		8		X40=		OR	X80=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									٠.,			
* If the ratry in column 1, is less than the entry in column 2, write "O" in column 3.										OR	+270=		
•	"If the raty in column 1 is less than the entry in column 2, write "U in column 3. "If the "Highest Number Pr violatly Paid For" IN THIS SPACE is 1 as than 20, enter "20." ADDIT. FEE "If the "Highest Number Pr violatly Paid For" IN THIS SPACE is 1 as than 3, enter "3."												
٠.	The Highest Nun	nber Previously Pa	d For (T tel	r Independ	lent) is the	highest numbe	r tound	in the app	Lobuste poi	ı in co	lumn 1.		

FORM PTO 876

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